

Kansas Immunization Program Unaccounted for Vaccine for Children (VFC) Vaccine Policy

The Kansas Immunization Program (KIP) is charged with monitoring provider VFC vaccine management practices which include reducing unaccounted for doses of vaccine. Unaccounted for VFC vaccines doses accounted for loss in excess of three quarters of a million dollars in 2008. VFC and 317 vaccines are funded by federal tax dollars and state taxes support state funded vaccines. Losses of this magnitude adversely impact the children who are eligible to receive these vaccines and the VFC program.

The Centers for Disease Control implemented new provider non-compliance processes for 2009 that each state immunization program must follow. These non-compliance processes are aimed at identifying, educating and preventing wasted and unaccounted for vaccines, improve vaccine management process and identify fraud or abuse in the VFC program. Accounting for and reducing unaccounted for vaccines is a large part of this program's focus.

Providers are encouraged to review internal vaccine management processes to assure they can account for all vaccines. This will help avoid unaccounted for vaccines. KIP staff is available to assist providers in analyzing vaccine management practices to help identify process improvements. KIP's goal is assure all VFC vaccine doses are available for administration to VFC-eligible children. Please contact your nurse consultant or the Topeka office for assistance.

Processes:

1. Submit these documents by the 10th of the month following the month of service: the monthly immunization/reconciliation report; wasted vaccine report; and temperature log.
2. Review Monthly Immunization Report (MIR)/reconciliations for unaccounted for doses to determine if one of the following may reconcile the discrepancy:
 - a. Compare positive numbers to negative one
 - i. Was the vaccine dose count correct?
 - II. Were lot numbers entered correctly?
 - b. Were the unaccounted for doses wasted?
 - c. Were doses borrowed and not accounted for or not repaid?
 - d. Were vaccines administered but not subtracted from the inventory counts?
 - e. Were VFC and private lot numbers mixed together?
 - f. Did private pay children receive VFC vaccines?
 - g. Did VFC-eligible children receive private vaccines?
 - h. Do vaccine lot numbers and expiration dates match those received in shipment; if not, these numbers may show as unaccounted for doses
3. Effective January 1, 2010, unaccounted for vaccines will be monitored and the percent of unaccounted for vaccine will be calculated monthly.

Unaccounted for Vaccine Policy:

1. Unaccounted for vaccines result in needless loss of vaccines which can not be utilized to protect VFC-eligible children
2. Unaccounted for vaccines may be the first indication of vaccine stockpiling, inadequate inventory control, vaccine used for non VFC-eligible children, or other more serious infractions of the VFC Program.
3. Unaccounted for vaccines will be monitored and documented monthly.
4. Unaccounted for vaccine percentage will be calculated monthly.
5. Unaccounted for vaccine percentage is determined by: (see attached)
 - a. Calculated ending inventory (what the inventory count should be after beginning inventory plus receipts minus administered doses)
 - b. Actual inventory (what is reported on MIR/reconciliation)
 - c. Actual is subtracted from calculated inventory to determine the difference in the two.
 - d. Difference is divided by the calculated inventory number to arrive at the percentage. Positive or negative percentages may occur if the actual is more or less than the calculated inventory. This is the unaccounted for percentage.
6. Percentages 10% or greater unaccounted for vaccines in first calendar quarter will result in a telephone call from KIP staff to discuss issues and identify corrective action.
7. Providers shall implement corrective actions to decrease unaccounted for vaccines.
8. Providers with 10% or greater unaccounted for vaccines in second quarter shall receive a face-to-face visit from nurse consultant to assist in identifying additional corrective actions to improve vaccine management processes and decrease or eliminate unaccounted for vaccines.
9. Providers with ongoing pattern of 10% or greater unaccounted for vaccines in third quarter shall submit:
 - a. Full inventory counts with each vaccine order
 - b. Provide KIP with written corrective action plan including timelines for significant reduction in unaccounted for vaccines and mechanisms to keep the unaccounted for vaccines to less than 5%
10. Providers with 10% or greater unaccounted for vaccines in fourth quarter following their written plan of correction (#9) shall be billed for all unaccounted for vaccines for the year.

A summary of wasted and unaccounted for vaccines will be provided to each VFC provider quarterly to provide them with a summary of their data.